

COVID-19 DIGITAL LISTENING for the

# MEDICARE INDUSTRY

*Direct-from-Beneficiary Insights and Competitor Trends*

3.30 – 4.02 BRIEFING

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MARKETBRIDGE



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**Note:** MarketBridge is directing a portion of its digital listening platform and analyst capacity to listening for digital commentary in the Medicare population—one of the most vulnerable groups—during this outbreak. This briefing focuses on the actions Health Payers are taking, how agents are servicing and supporting members, and what members are saying to help inform Health Payer response to this crisis.

The outbreak is moving quickly, and much of the commentary in this briefing will fall rapidly out of date. We will continue to update and provide these briefings on a regular basis for the foreseeable future.

If there are any questions on the attached, please contact Bill Sheldon at [bsheldon@market-bridge.com](mailto:bsheldon@market-bridge.com). Please stay healthy and safe.

# Health Payer Updates Related to Coronavirus

As of April 2, 2020

UHC	ANTHEM BCBS	HUMANA	AETNA	KAISER PERMANENTE	CIGNA
<ul style="list-style-type: none"> <li>• <u>Waiving member out-of-pocket payments for Coronavirus treatments</u> – applies to MA, Medicaid, commercial plans</li> <li>• <u>Waiving cost-sharing for in-network non-Coronavirus telehealth visits for MA, Medicaid, fully insured and group members</u></li> </ul>	<ul style="list-style-type: none"> <li>• <u>Waiving member out-of-pocket payments for Coronavirus treatments</u> – applies to all members through May 31, 2020</li> </ul>	<ul style="list-style-type: none"> <li>• <u>Simplifying and expediting claims processing for providers</u></li> <li>• <u>Suspending prior authorizations and referral requirements for:</u> <ul style="list-style-type: none"> <li>• All providers (regardless of network) related to Coronavirus care</li> <li>• In-network providers for care unrelated to Coronavirus</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• No new updates</li> </ul>	<ul style="list-style-type: none"> <li>• No new updates</li> </ul>	<ul style="list-style-type: none"> <li>• No new updates</li> </ul>
OSCAR	BRIGHT HEALTH		ALIGNMENT HEALTHCARE		CENTENE
<ul style="list-style-type: none"> <li>• <u>Conducted 62% more telehealth visits per 1,000 members in March 2020 compared to March 2019 (about 20% of which are directly related to COVID-19.)</u></li> </ul>	<ul style="list-style-type: none"> <li>• No new updates</li> </ul>		<ul style="list-style-type: none"> <li>• <u>Launched two programs to address medical and social challenges:</u> <ul style="list-style-type: none"> <li>• COVID Risk Assessment Tool (available to general public)</li> <li>• Crisis meal delivery program (two weeks of meals for at-risk members who cannot otherwise access food)</li> </ul> </li> </ul>		<ul style="list-style-type: none"> <li>• <u>Covering Coronavirus-related screening, testing, treatments for MA, Medicaid, Marketplace members (inclusive of telehealth) through June 30, 2020</u></li> <li>• <u>Eliminating provider co-pays and authorization requirements</u></li> </ul>

# Agent Conversations Related to Coronavirus

As of April 2, 2020

## TRENDS TO ADDRESS

- Carriers are introducing new methods to support agents completing the enrollment process without F2F contact
- Although many carriers confirmed to agents CMS has not advised a SEP, confusion may remain among agents

Cigna introduces additional support for Medicare agents enrolling customers:

- New enrollment telephone service uses specialists to help complete the process
- Agents remain the Agent of Record (AOR)

**“RETRACTION NOTICE!... We are in unprecedented times. Humana recognizes the importance of communicating SEP guidance to our sales agents and working closely with CMS to ensure accuracy and timeliness. On March 27, 2020 we issued guidance that an SEP was available in certain areas where a Major Disaster has been declared on the FEMA website.**

CMS has advised that at this time, there is no SEP in effect for the Covid-19 Pandemic. We apologize for any confusion this may have caused and assure you we are working very closely with our regulatory partners to keep you informed during this uncertain time.”

“WellCare: Retraction: Declared Special Enrollment Period: COVID-19...Please disregard the previous communication, sent on 3/27/2020, announcing a Special Enrollment Period due to COVID-19.”

“Anthem Amerigroup says that there is one and has not retracted it.”

“One of my regional carrier reps just called and talked the five-month SEP. Said CMS is supposed to provide further clarification this week, like we keep hearing.”

“Aetna Medicare...UPDATE: Retraction of recent SEP opportunity communication”

“I have 2 clients that wanted to make a move once they received their increase in rates notification from Medsupp carrier. Will this Sep if activated apply for them as well from Medsupp to MAPD?”

# Senior Audience Conversations Related to Coronavirus

As of April 2, 2020

## Seniors trying to keep distance from adult children, grandchildren...

- “On the other hand, I know many adult children stopping in to visit, or check in on their parents. We have two sons who planned to join us, along with their SOs for Easter dinner. I haven't asked them to stay home, yet. But I'm wondering if most parents would?”
- “No visits. Grandkids are just far enough away that we don't visit except electronically. I miss them.”
- “Frankly, I am happy being "banned" from seeing any relatives. I am high risk and it is certainly not worth the potential of dying to leave my house. Some of my older friends and relatives are even higher risk than me and are even more nervous about the corona virus.”
- “We asked our daughter and SIL to cancel their trip for Easter. They were grateful.”
- “If when the weather gets a bit nicer here my son and his family asked if I'd like to come over and spend some time in their backyard, I might do it on the understanding that I'd be keeping at least 6 feet away from any of them at all times. Then again, I might not go. I'm hoping they don't ask, to be honest.”

## ...But some must babysit for grandkids as adult parents continue to work

- “The grandkids were here today while their parents worked. We cleaned all surfaces when they left. All of us are washing hands constantly, I hit 10+ times before noon with making cookies, snacks and lunch. We went on a long bike ride and we were in the pool for over an hour; being outside is good for all of us with less contact inside...They will be back on Thursday and we'll do it all over again. We don't see them outside of those two days.”
- “We see our daughter every day. School is closed and we babysit weekdays for our 8 year old grand daughter. We're both in our 70's. The way things are going this could last up to the usual summer break.”
- “2 of my grandkids ages 9 and 7 have been to our house for child care since this started. My daughter is doing her best to keep visits down due to the coronavirus. Right now they are out of school until May and doing school at home. My daughter has started to work from home as well, but may be called in at any time. If that happens, we will step up to help with the kids.”

# Medicare News Related to Coronavirus

As of April 2, 2020

## **CMS CHANGES TO HELP HEALTHCARE SYSTEM ADDRESS CORONAVIRUS**

- The new rules and waivers of federal requirements aim to ensure hospitals and health systems can effectively manage the increase of Coronavirus patients:
  - Allow hospitals to move patients to outside facilities, while still receiving hospital payments under Medicare
  - Pay lab techs (and certain hospitals) to travel to a Medicare beneficiary's home to test for the virus
  - Suspend requesting additional information from providers, healthcare facilities, MA plans, MAPD plans (including audit activities)
  - Modify the calculation of 2021 and 2022 Part C and D Star Ratings to address the disruption of data collection and measurement scores due to the virus
  - Cover respiratory-related devices and equipment under Medicare
  - Expand access to telehealth for Medicare beneficiaries – clinicians, hospice providers and home health agencies can provide services via telehealth if it is feasible and appropriate to do so

## **MINORITIES MAY BE AT HIGHER RISK FOR CORONAVIRUS DUE TO UNDERLYING HEALTH CONDITIONS**

- Experts worry the impact of the virus may be felt “disproportionately by the poor, the vulnerable, the marginalized and obviously that falls down in this country on communities of color”
- Underlying conditions include high blood pressure, diabetes, heart disease, and lung diseases – all disproportionately found in blacks, Latinos and Native Americans

## **AARP CALLS FOR EXTRA ATTENTION TO MENTAL HEALTH**

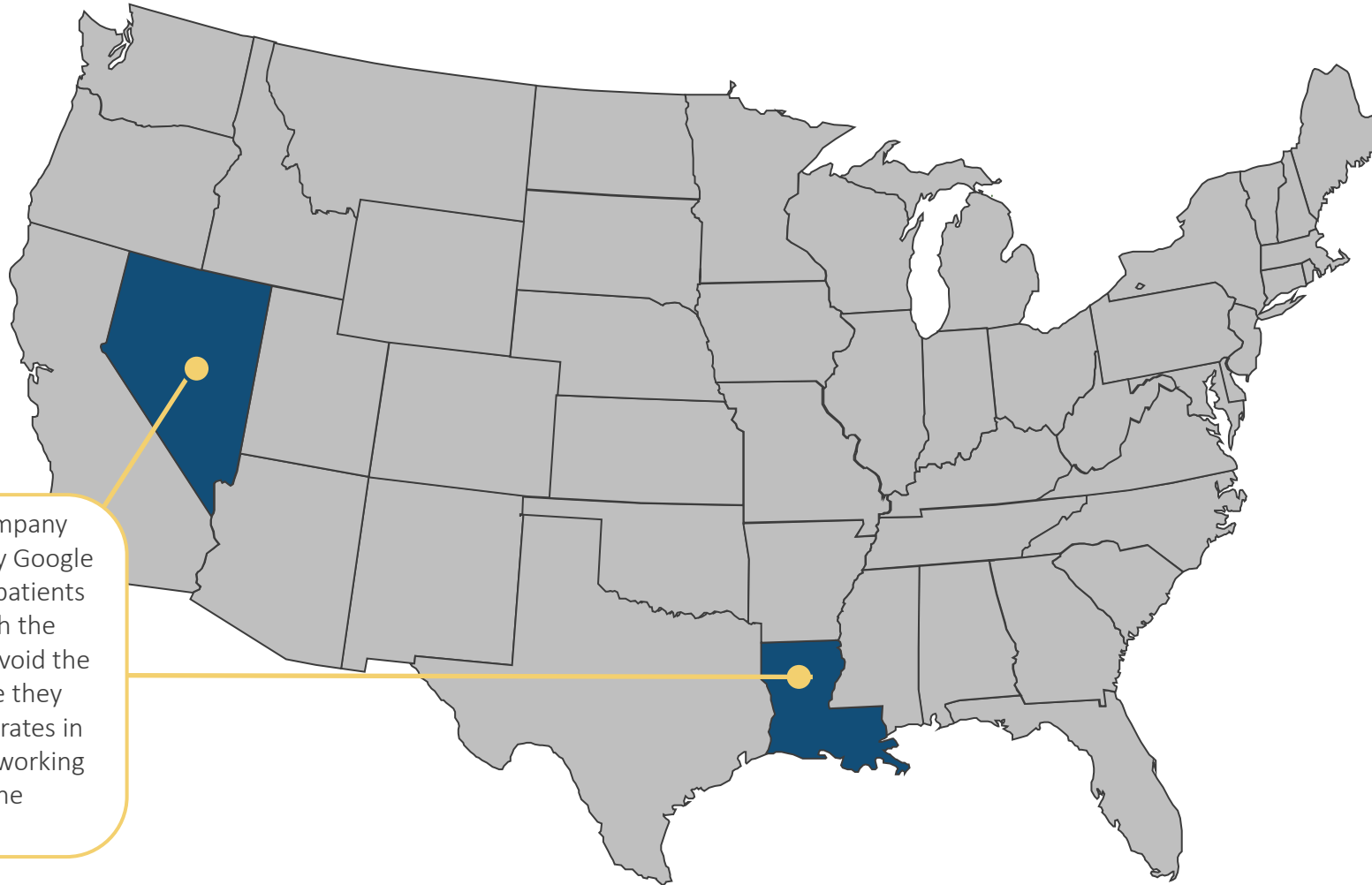
- Considering depression is already more common and more severe in both older adults and those living in poverty, these populations are even more vulnerable to feelings of sadness, anxiety, stress and depression due to the Coronavirus
- AARP suggests seniors limit news consumption, continue to connect with family and friends while respecting social distancing, and exercise regularly

## **HEALTH SYSTEM PRESIDENT WARNS OF NEW NORMAL POST-CORONAVIRUS**

- For telehealth in particular (including remote monitoring), the virus has accelerated its adoption and use across the nation; reverting to lower reimbursement cost and coverage post-virus will likely not be tolerated by providers and members
- Partnerships between payers and health systems are likely to increase to provide better care to consumers at a lower cost

# Coronavirus Updates by Geography

As of April 2, 2020



On-demand medical care company [Ready Responders](#), backed by Google Ventures, has begun testing patients in-home for Coronavirus, with the goal of allowing patients to avoid the ER, while still getting the care they need. Ready Responders operates in Louisiana and Nevada but is working to expand to other parts of the country.

# Appendix

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# Health Payer Updates Related to Coronavirus

As of March 30, 2020

UHC	ANTHEM BCBS	HUMANA	AETNA	KAISER PERMANENTE	CIGNA
<ul style="list-style-type: none"> <li>No new updates</li> </ul>	<ul style="list-style-type: none"> <li>Florida Blue to <u>extend grace period for Med Supp members unable to pay their premiums, through May 31, 2020</u></li> <li>Florida Blue to <u>delay disenrollment of MA or PDP plans until annual renewals</u></li> </ul>	<ul style="list-style-type: none"> <li><u>Waiving member out-of-pocket costs for Coronavirus treatments</u> – applies to all members at in-network or out-of-network providers (no end date announced)</li> <li><u>Lifting administrative requirements to move members from inpatient hospitals to post-acute care settings</u></li> </ul>	<ul style="list-style-type: none"> <li>No new updates</li> </ul>	<ul style="list-style-type: none"> <li>No new updates</li> </ul>	<ul style="list-style-type: none"> <li><u>Waiving member out-of-pocket costs for Coronavirus treatments</u> – applies to all members at in-network providers through May 31, 2020</li> <li><u>Deploying hundreds of on-staff clinicians to join MDLIVE team, to increase capacity</u></li> <li><u>Partnering with Buoy Health (AI platform) to give members online COVID triage tool</u></li> </ul>
OSCAR	BRIGHT HEALTH		DEVOTED HEALTH		MOLINA
<ul style="list-style-type: none"> <li>No new updates</li> </ul>	<ul style="list-style-type: none"> <li>No new updates</li> </ul>		<ul style="list-style-type: none"> <li>No new updates</li> </ul>		<ul style="list-style-type: none"> <li>No new updates</li> </ul>

# Health Payer Updates Related to Coronavirus

As of March 26, 2020

UHC	ANTHEM BCBS	HUMANA	AETNA	KAISER PERMANENTE	CIGNA
<ul style="list-style-type: none"><li>No new updates</li></ul>	<ul style="list-style-type: none"><li>No new updates</li></ul>	<ul style="list-style-type: none"><li>Humana <u>expanded access to telehealth services</u> for members:<ul style="list-style-type: none"><li>Waiving cost sharing for MDLive for MA members</li><li>Will reimburse telehealth visits at same rate as in-person visits</li><li>Expanding telehealth coverage to audio-only visits</li></ul></li></ul>	<ul style="list-style-type: none"><li>No new updates</li></ul>	<ul style="list-style-type: none"><li>No new updates</li></ul>	<ul style="list-style-type: none"><li><u>Waived prior authorizations</u> for commercial and MA members who are not COVID patients to be transferred out of hospitals and into long-term acute care hospitals</li></ul>
OSCAR	BRIGHT HEALTH	DEVOTED HEALTH	MOLINA		
<ul style="list-style-type: none"><li>No new updates</li></ul>	<ul style="list-style-type: none"><li>No new updates</li></ul>	<ul style="list-style-type: none"><li>No new updates</li></ul>	<ul style="list-style-type: none"><li>Molina launched a new <u>Coronavirus Chatbot</u> for members looking for current insights, risk factors, live help and actions to take if symptoms appear</li></ul>		

# Health Payer Updates Related to Coronavirus

As of March 23, 2020

UHC	ANTHEM BCBS	HUMANA	AETNA	KAISER PERMANENTE	CIGNA
<ul style="list-style-type: none"> <li>• Waived telehealth costs with any of its partner platforms (previously encouraged use of telehealth)</li> <li>• Deploying <u>home-based care management tool</u> for highest-risk members</li> </ul>	<ul style="list-style-type: none"> <li>• BCBS of CA launched a <u>digital tool</u> that hospitals can build into their websites to “assist patients in navigating their symptoms and in seeking out information about the virus”</li> </ul>	<ul style="list-style-type: none"> <li>• No new updates</li> </ul>	<ul style="list-style-type: none"> <li>• No new updates</li> </ul>	<ul style="list-style-type: none"> <li>• No new updates</li> </ul>	<ul style="list-style-type: none"> <li>• No new updates</li> </ul>
OSCAR	BRIGHT HEALTH		DEVOTED HEALTH		CLOVER HEALTH
<ul style="list-style-type: none"> <li>• No new updates</li> </ul>	<ul style="list-style-type: none"> <li>• No new updates</li> </ul>		<ul style="list-style-type: none"> <li>• No new updates</li> </ul>		<ul style="list-style-type: none"> <li>• No new updates</li> </ul>

# Health Payer Updates Related to Coronavirus

As of March 17, 2020

UHC	ANTHEM BCBS	AETNA	KAISER PERMANENTE	CIGNA
<ul style="list-style-type: none"><li>• Waived cost sharing for testing</li><li>• Encouraging use of telehealth</li><li>• Free access to emotional phone support</li></ul>	<ul style="list-style-type: none"><li>• Waived cost sharing for testing</li><li>• Waived telehealth costs (including mental health visits) during next 90 days</li><li>• Waived early medication refill limits to 90 days</li><li>• Accelerating access to Coronavirus Assessment via Anthem Mobile App</li></ul>	<ul style="list-style-type: none"><li>• Waived cost sharing for testing</li><li>• \$0 copays for telehealth visits during next 90 days</li><li>• Waived fees for mail-order service of drugs</li></ul>	<ul style="list-style-type: none"><li>• Waived cost sharing for testing</li><li>• Encouraging use of telehealth</li></ul>	<ul style="list-style-type: none"><li>• Waived cost sharing for testing</li><li>• Waived cost sharing for telehealth screenings</li><li>• Free home delivery of up to a 90-day supply for drugs</li><li>• Offering supportive resources for anyone to help manage anxiety</li></ul>
OSCAR	BRIGHT HEALTH			
<ul style="list-style-type: none"><li>• Launched first <a href="#">testing center locator</a> – accessible to general public</li><li>• Released at-home risk assessment survey</li><li>• \$0 telemedicine calls</li></ul>	<ul style="list-style-type: none"><li>• Waived cost sharing for testing, regardless of network</li><li>• Authorized early medication refills</li><li>• 100% coverage of telehealth costs</li><li>• Waived ride limits, increased availability of non-emergent transportation</li></ul>			

# Agent Conversations Related to Coronavirus

As of March 30, 2020

## TRENDS TO ADDRESS

- Agents are hearing rumors about SEP extensions but are unsure of the validity of such statements
- Health payers should consider providing clarification about the SEP

“According to Wellcare they have extended the OEP and other election periods people had from 1/20 to 3/13 for every County in America. Now this is coming from Wellcare who has never been right about anything so we should probably wait for further clarification.”

“Does anyone have any additional info on this? I don't see any other carriers out there saying this nor can I find anything on CMS or Medicare.gov on extending election periods.”

“Humana is providing more conflicting information...”

# Agent Conversations Related to Coronavirus

As of March 26, 2020

## TRENDS TO ADDRESS

- Agents who are unfamiliar with selling over the phone are seeking information about best practices from peers
- Health payers are offering multiple tools for agents to use for enrolling prospects online or via phone

"I'm getting myself set up to better work over the phone from home. I've been researching how agencies who have been selling over the phone for a couple years or more have done that successfully. I remember some discussion about telesales being most successful in a call center environment. That led me to wonder what the call centers are doing about social distancing for their agents, and what steps they might be taking for agents to work remotely. @NSRH ? @Chase Urich , don't you have a call center, too? Any call center agents reading this?"

"Good question"

"I would love for Jeff Root / Digital BGA to respond as well"

"We do have brick and mortar call centers on our platform and they all moved their teams remote. All you really need is a cheap laptop, internet connection and a headset."

"8 total offices.... 200 Agents.... 150 Support Staff...All working remotely from home now. Seamless transition over the course of 72 hours."

"Our focus is F2F. We are leaving the telesales to the pros"

Resource from the [National Contracting Center \(NCC\)](#) details how health payers are helping agents serve clients during this time:

**Aetna:** offers options for phone and online enrollment via a few tools:

- The Remote Agent Telephonic Enrollment (RATE) tool: agents must meet certain requirements like access to the app, have an iPad and complete online compliance training
- E-Kits: more flexible requirements, although agents must complete a compliant sales presentation before using E-kit for enrollment

**Humana:** asking agents to use their e-enrollment tools primarily, and requesting electronic procedures be used to submit any necessary paper applications:

- Advised agents to avoid F2F meetings
- Submit enrollment applications using Enrollment Hub or FastApp electronic tools with prospect/member's permission

**UHC:** offers remote enrollment capabilities through Jarvis, which provides electronic SOA and remote signature options, as well as guidelines:

- New guidance and resources for selling Medicare online and via phone
- UHC's new "Virtual Appointment and Enrollment" job aid – compliance guidelines and detailed instructions for enrolling clients through UHC LEAN

# Agent Conversations Related to Coronavirus

As of March 23, 2020

## TRENDS TO ADDRESS

- Agents need regular communication to navigate changing situation
- Questions have surfaced about Telemedicine
- Agents are trying to navigate switching to phone appointments and e-applications (vs. F2F appointments)
- Agents are looking to/working to open new outreach channels
  - Auto dialers
  - Video use
  - SMS

**"I also think the IMO could have addressed this issue for agents a bit better.** Maybe provided more tips. The only thing they have said on Monday was to proceed as usual but to offer a telesales approach if the prospect asked but not to lead with it. I suppose since Wednesday/Thursday things have definitely changed. And I personally feel like we should have been meeting daily this week vs usual once a week."

"I am, like Kgmom looking for what **rules for telemedicine may have changed since the announcement on Monday**...The hold time on the line for one of our local telemedicine providers that contracts with carriers and also takes individual enrollments is now 3 hours, just tried this afternoon since I have a client that could use the option"

"I only have 2 carriers that accept remote signature. I may need to contract with other carriers outside my IMO list of carriers."

"A lot of those with e-app require them to be conducted face to face. SNL is just now trying to set up a system where you can use their eapp over the phone."

"Most insurance providers have an e-app. Not saying all, but enough that you don't have to go into someone's home right now. If you want to work, I'd reach out to old leads that didn't buy and reconnect. It's cheaper and warmer than a FB lead."

"Out of the many people I called/door knocked, Only 3 flat out said they didn't want to meet because of the news of the pandemic/their health. 1 of which I got to do a phone consult or whatever you call it...I door knocked until .... well the governor closed down the businesses - today."

"I had one potential client on Monday who really wants to see someone in person, but I think in a short time, they will change that idea. My Wednesday preset in person appt, texted me in the morning to change to phone, and our area has a growing number of Corona cases. I was dreading asking to make it phone, but client beat me to it. Whew! The trend is online and phone, it seems."

"For example, @HoosierLife has been encouraging his agents to purchase the less expensive state-wide FB leads and to pursue telesales. That's a smart move."

- Response from @HoosierLife: "Yeah I had to build out a fledgling telesales platform basically overnight...Nothing close to their platform, but I've got a Dialer with sms, email drip campaigns and automations built in when the agent dispositions the call. Video training for our agents as well on how to set it up and operate."

"Really WHY, no one should be out doing, ftf meeting, if you are doing those things you are just stupid...."

# Agent Conversations Related to Coronavirus

As of March 17, 2020

## TREND

*Impacting typical F2F agent-to-consumer transactions – despite potential easier access to consumers sheltering in place*

## IMPACT

*Less access to Medicare-eligibles via traditional visits.*

*Increased efforts in mail, digital and phone outreach to maintain contact – watching response...*

“Mailing some policies I was going to F2F deliver. Doing more stuff by mail locally I would have normally done F2F. But still plan on seeing some of my people F2F.”

“Looks like F2F sales in Ca. is gone for awhile. Gov. Newsome just called for home isolation for all seniors 65 and over. and he is closing all bars and nightclubs in Ca.....”

“I’m not on the doors today. I may pull some old FE Leads and see if the FE types are still willing to open their doors. I can tell you that up market a little bit the Coronavirus is the excuse du jour to do not let me in.” (PA)

“Let us know how you do. I have some old leads in Bucks/Mont Co, but with the sister counties on all but lockdown, I’m afraid to venture out except to the grocery store/gas station. I’m listening to Gov. Wolf. I’m working on some web/internet marketing I hope to test out by late this week.” (PA)

“I’m personally more worried about catching something from prospect than the other way around...I’m not yet trained in telesales so until then I’ll limit my large group interactions so meeting one on one should be okay as long as both client and agent take precautions.”

“I just had My first person use it as an excuse Sunday. Wife invited me in but procrastinator husband was in the other room like “no”. I figured I’d do more door knocking because more people will be home and it’s easier to give that excuse on the phone.”

“I actually sent out a 4200 piece postcard mailer last week for Medicare supplements and I have noticed a slight increase in my response rate so far. Time will tell though.”



# Senior Audience Conversations Related to Coronavirus

As of March 30, 2020

## Seniors thankful for SilverSneakers at-home workouts

- “This is one of the very positive things that have happened. Seniors have been taking advantage of Silver Sneakers, joining gyms, attending balance classes, yoga and chair yoga, water aerobics, etc. getting healthier and staying fit, staying well and being active and it saves money in health care.”
- “Yes thank you for all the videos, my gym is currently closed”
- “This has been so helpful, thank you”
- “Do you think you could make these videos so us non members can see them during this time being house bound due to COVID-19? I sure need to have exercise but my medicare plan is basic and I'm unfortunately not a member and can't log in and see them.”

# Senior Audience Conversations Related to Coronavirus

As of March 26, 2020

## Older adults need more clarity about the implications of the stimulus package:

- “Has anyone been able to decipher if those of us on a small pension and SS will get a check? I do not make enough to file taxes so i will not be “found” that way. I'm just curious. Thanks.”
- “I filed for renters credit only, didn't have enough social security for other taxes. I haven't filed for this year as I go through the AARP free tax filing and didn't want to mingle with not knowing how the virus was going. So maybe I'll get it. This is a wait and see situation.”
- “Yes, you are supposed to get a check as well. I have read that there are provisions in the bill that cover people who don't earn enough to file a return, but I don't know specifically how you will be “found.””
- “I heard something today that you have to file tax return to get a check. Now you don't have to actually pay taxes, just fine the return. Probably info about it on Google.”

## Adult children are worried about how isolation (due to the virus) will impact their senior-aged parents:

- “This article hits home...Now he [dad] is isolated. Feeling depressed for himself...And he asks me, “Is this how I die...of isolation?””
- “My 94-yo mom is still mentally sharp. My biggest worry for her right now is the possibility of a decline from lack of social interaction.”
- “Boy, this is the hardest part. My Mom is in the late stages of Alzheimer's and even in person, it's hard to interact with her. I've done the through the window visits and they are a disaster. Technology is useless for her... She doesn't have long to live but apparently it would be more awful to die of Corona than something else?”
- “My 90 year old dad is in the memory unit and on hospice. The home shut down visitors about 2 weeks ago. The good thing is that he has no clue of what is going on. I worry I might never see him again before this ends.”
- “I'm a primary care physician...I understand the contagious risk, but I also understand preserving the humanity in this situation...”

# Senior Audience Conversations Related to Coronavirus

As of March 23, 2020

## Older adults are confused about what insurers will cover related to the virus

- “The copay on TESTING for COVID19 is waived -- not on any other treatment that may be required such as office visit, hospitalization, drugs, etc. Most providers are also screening for flu, pneumonia, strep before testing for COVID19 -- those charges are not covered with no cost share.”

Responses:

- “Oooh good point and one I had not thought of.”
- “Does the fine print say “only if medically necessary”? For the testing? I can see insurers saying oh the test is neg, it wasn’t medically necessary after all so we won’t pay”
- “Health insurance will do or twist anything to get out of paying.”

## High-risk older adults are particularly concerned about contracting the virus

- “I am diabetic and I usually follow my diet so well, and tonight I really blew it BIG TIME. So maybe that's why I'm freaking out. But maybe I mindlessly blew my diet tonight is because I was already subconsciously so upset.”
- “My husband and I are considered very high risk so we really need to stay home. Well, I tried to even order some dry beans online and even that is all sold out, there simply is nothing. Each day the store opens and they are lined up at the door all the way to the road. We must order online and get it delivered but now delivery is over a week out and by the time they pull an order the shelves are bare of the little they got in that day.”
- “Where do I even start with this? I lost my job last year and due to my age and underlying health issues...I am freaking terrified and I’m more scared of having to go to a hospital than I am of getting the virus but with my age and health issues there’s no doubt in my mind I’d need a ventilator if I get ill and instead I’ll probably die because if they need to make a choice I’m out and I can’t pay out of pocket.”

# Senior Audience Conversations Related to Coronavirus

As of March 17, 2020

Seniors are thankful for considerations brands (like grocery stores for example) are making for them:

- “I think this is nice very considerate I'm 63 went to cancer treatments I have no desire to come out and take the risk.”
- “Dollar general thank you for thinking about somebody grandmother mother aunt sister.”
- “Thank you for thinking of us seniors! It is very kind.”
- “Awesome job DG!! More need to follow up with this and help those that need it the most. I think it’s a great idea for all the time really we should do more for the elderly people!!”

Some seniors may be unhappy – for seniors who may already feel lonely, facing the prospect of living in ‘isolation’ may further compound feelings of sorrow:

- “I thought I just needed to accept the fact that now I am over 60 I am treated like I am invisible to society... now it seems that those of us over 60 are also considered dispensable.”
- “Unfortunately 60 seems to many an age where people are no longer of value. Nothing could be further from the truth.”

# Medicare News Related to Coronavirus

As of March 30, 2020

## **CMS ACCELERATES MEDICARE PAYMENTS**

- Within the Coronavirus Aid, Relief and Economic Security Act (CARES), a provision allows for all Medicare providers to “tap into an emergency fund in order to shore up their cash flows”
- All hospitals, doctors, durable medical equipment suppliers and other Medicare Part A and Part B providers and suppliers who billed Medicare within the last 180 days, are not in bankruptcy, not under investigation or have any outstanding Medicare overpayments are eligible
- CMS will start accepting and processing requests immediately, with payments going out within seven days

## **COVID MAY RAISE MEDICARE SPENDING BY AS MUCH AS \$115B OVER NEXT YEAR**

- The National Association of Accountable Care Organizations released the analysis which also found the increase in spending “would lead to major losses for ACOs in models that take on financial risk”
- The analysis also found a “major burden” on MA plans

## **SKILLED NURSING FACILITIES OPPOSE TRANSITION OF ACUTE CARE PATIENTS**

- Although CMS recently relaxed rules related to which Medicare patients can receive nursing home care, nursing homes are pushing back against hospitals and these recent rule changes
- While hospitals need to clear out patients who no longer need acute care, skilled nursing facilities are worried moving these patients into their facilities may inadvertently put the health of other residents at risk

## **CMS GRANTS ADDITIONAL MEDICAID WAIVERS**

- Last week, CMS granted six more states flexibility for their Medicaid programs to respond to COVID, bringing the total number of waivers granted to 29 states
- On average, CMS is approving each in less than a week

# Medicare News Related to Coronavirus

As of March 26, 2020

## **SOCIAL DETERMINANTS OF HEALTH COMING TO FOREFRONT**

- One of the main social determinants at risk for seniors is food security – although many grocery stores have created special senior-only shopping hours, seniors may be apprehensive to go to the store, cannot get there or cannot afford to stockpile nonperishable goods
- Additionally some senior centers and food banks have closed or have stopped serving in-house meals in response to the virus
- Noted wealth and income disparities exist among older adults by race, ethnicity and gender – Black, Latino or Hispanic adults, as well as women, tend to have higher rates of economic insecurity than white adults and men
- Meal delivery systems can address food insecurity issues for at-risk seniors or other vulnerable populations to get them the nutrition they need

## **CMS TO PAUSE NURSING HOME INSPECTIONS**

- During the three-week pause, inspectors will “emphasize controlling infections, and focus on facilities at risk from the new coronavirus and those with potential issues posing the most peril to residents”

## **MORE SCAMS TARGETING SENIORS, LOW-INCOME MEDICAID RECIPIENTS**

- HHS reports “it’s seeing marketing schemes rapidly pivot to offering tests for COVID-19 and ‘Senior Care Packages’ with hand sanitizer or even tout a vaccine...some marketers falsely claim that President Donald Trump has ordered that seniors get tested” – for all scams, providing one’s Medicare number is required
- The sales pitches are coming via telemarketing calls, robocalls, social media posts, emails and door-to-door visits

## **CMS APPROVES ADDITIONAL MEDICAID WAIVERS FOR 11 STATES**

- The waiver includes a simple checklist by which states can indicate the stipulations they would like to suspend
- 13 states in total have received approval for their waivers

# Medicare News Related to Coronavirus

As of March 23, 2020

## **CMS EXPANDS TELEHEALTH FOR SENIORS**

- All seniors to have access to telehealth options
- Previously, Medicare beneficiaries could only access telehealth services for routine check-ins

## **CONGRESS LIKELY TO SUSPEND MEDICARE SEQUESTER**

- Although not yet final, suspending the Medicare sequester, which reduced spending for most benefits by 2% starting in 2013, would be suspended from May 1 to December 31, 2020
- The draft package would also temporarily waive requirements that home dialysis patients conduct visits with their doctor face-to-face
- “The draft text would also allow the HHS secretary to develop and implement a new payment rule for federally qualified health centers and rural health clinics that provide telehealth services to eligible patients”

## **HOME HEALTH PROVIDERS ASK FOR FLEXIBILITY**

- In order to properly serve COVID patients at home, agencies are asking CMS to allow for provisions that would provide greater flexibility related to the ‘homebound requirement’
- As the rule stands, the program only covers home health services if the patient is homebound; this rule would prohibit home healthcare providers from treating most people who contract the virus
- Home health providers are also asking Medicare to cover telehealth visits beyond what is currently covered (remote monitoring to “augment the care planning process”)

## **HHS MAY DELAY COST SHARING RULES**

- Policymakers are considering delaying the timeline for which providers, payers and health IT vendors would have to implement data-sharing regulations
- Committee members are worried the upcoming requirements may “inadvertently pull people off important pandemic work”

## **CMS WAIVING REPORTING EXEMPTIONS FOR MEDICARE PAYMENT PROGRAMS**

- For providers and hospitals participating in Medicare quality programs, reporting requirements and data submissions will be waived or extended
- Aim is to reduce the administrative burden on healthcare workers

# Medicare News Related to Coronavirus

As of March 17, 2020

## **CMS WAIVES HOSPICE RULES**

- Allows expanded use of telemedicine to help limit close contact between provider and patients
- Further provision to expand telehealth will be forthcoming from CMS in near future

## **HHS AUTHORIZED TO EXPAND MA NETWORKS**

- If HHS believes expanding MA beneficiaries' access to out-of-network care can contain the spread of the virus, it now has the authority to do so
- If deemed necessary, HHS would ensure enrollees do not pay more than would be required had they received services from in-network providers

## **CMS RECOMMENDS NURSING HOMES BAN ALL VISITORS**

- CMS is recommending nursing homes not allow any visitors
- Exception would be in 'compassionate care situations, such as end-of-life'
- However, lack of visitation could increase feelings of isolation for nursing home residents



# Coronavirus Updates by Geography

As of March 30, 2020



Texas Health and Humana Services will automatically renew Medicaid and SNAP benefits for members to continue coverage, through the foreseeable future.

Massachusetts is asking nursing homes to move their elderly residents to other nursing homes, in order to use the facilities to treat COVID patients. The state's HHS Secretary reports private insurers and the state's Medicaid program are "coordinating to establish financing structures to support the effort." Indiana has considered a similar move.

# Coronavirus Updates by Geography

As of March 26, 2020



A PA Senator secured \$250M in funding to help feed seniors across the country during this time; \$10.2M of the funding will ensure PA agencies for seniors will have the funds to continue providing meals. The Senator introduced another bill to address the health and financial needs of seniors and those with disabilities.

St. Augustine, Florida will be distributing smart thermometers to some of its citizens to provide real-time data “that might be able to anticipate when and where the next coronavirus hot spot could happen.” The internet-connected thermometers will crowd-source unusual fever activity in real-time and may predict clusters of the virus before official testing can take place.

# Coronavirus Updates by Geography

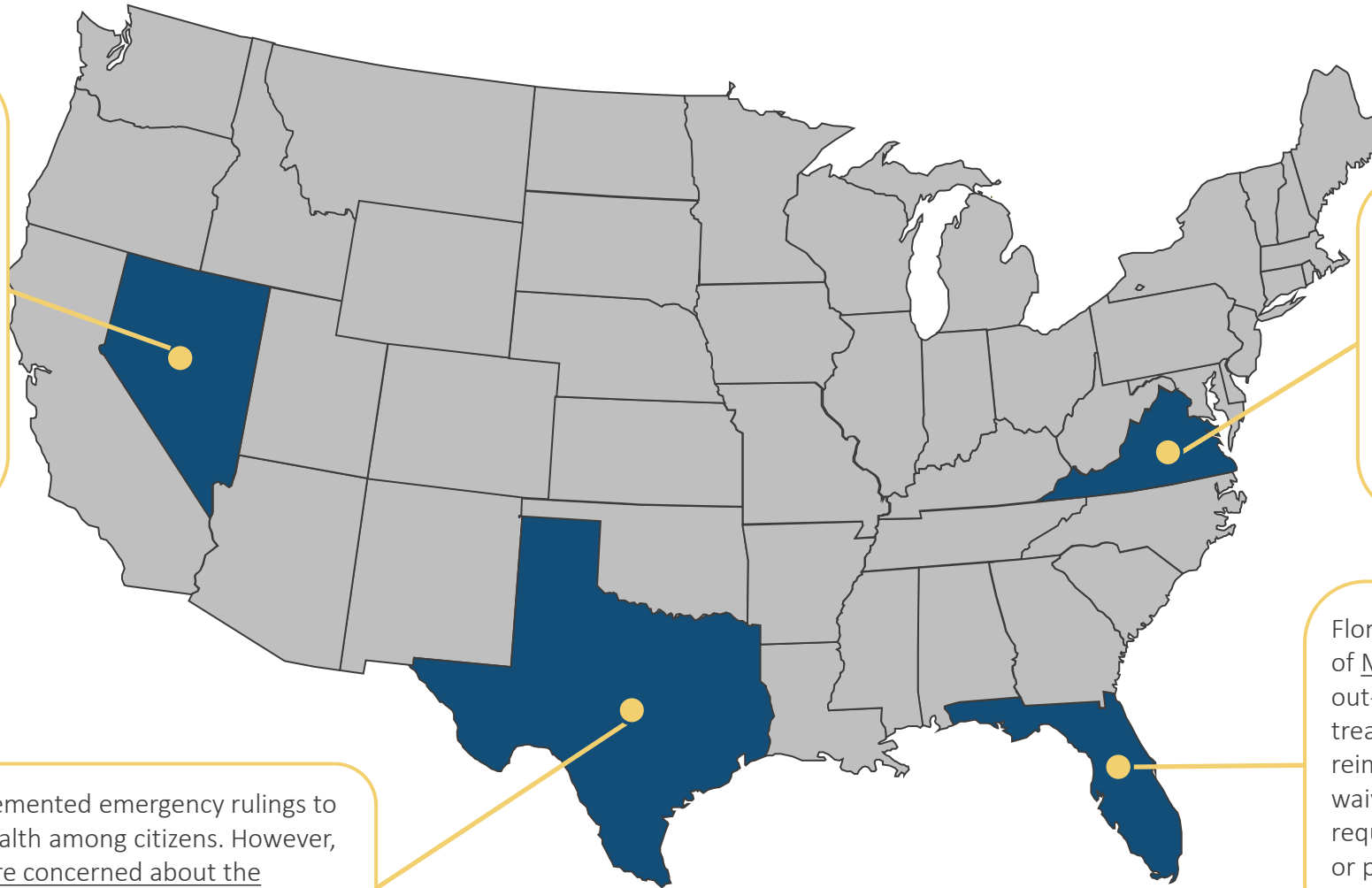
As of March 23, 2020

Healthcare Partners Nevada launched a free, downloadable app to help detect COVID symptoms for its high-risk myGeneration Senior Clinic patients. Vital signs are monitored remotely and if symptoms suggest COVID, patients will be contacted by video conference for further evaluation.

In Texas, the Governor implemented emergency rulings to encourage the use of telehealth among citizens. However, consumers and advocates are concerned about the confusion and misinformation (some, sourcing from insurance customer service reps) about if an insurer will pay for telehealth care, and *which* services will be covered.

CMS is warning Medicare beneficiaries to be cautious of Coronavirus related scams. Scammers are promising Coronavirus testing, masks or other items, in exchange for one's Medicare number. In Virginia, scammers are posing as church clergy members asking for money or gift cards, via email.

Florida is the first state to take advantage of Medicaid flexibility – authority to use out-of-state providers and hospitals to treat Medicaid patients and qualify for reimbursement. Also, the government will waive “30 days pre-admission screening requirements for nursing-home placement or placement in institutions for people with developmental disabilities.”



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